

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAL ASSISTANCE ADMINISTRATION
Olympia, Washington**

To: All Prescribers
Managed Care Plans
Regional Administrators
CSO Administrators

Memorandum No. 02-11 MAA
Issued: April 15, 2002
For Information Call:
1-800-562-6188

From: Douglas Porter, Assistant Secretary
Medical Assistance Administration

Subject: Prescriber's Identifier - Prescription Drug Program

The Medical Assistance Administration (MAA) is requesting prescribing providers who have a 9-digit Drug Enforcement Agency (DEA) prescriber number to put their DEA number on all prescriptions for Medical Assistance clients, **effective immediately**, instead of their 7-digit DSHS provider number.

If you have a DEA number, please complete the attached information sheet.
When completed, fax the information sheet to **(360) 586-1209** or fold in thirds, tape closed (do not staple), and mail to MAA. No postage is necessary.

Providers who do not have a DEA number must continue to put their 7-digit DSHS provider number on prescriptions for Medical Assistance clients.

To obtain MAA's Billing Instructions and/or Numbered Memorandums electronically, go to: <http://maa.dshs.wa.gov> [Provider Publications/Fee Schedules link].

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Prescriber's Identifier for Prescription Drug Program Information Sheet

**When completed, fax to (360) 586-1209 or
fold in thirds, tape closed (do not staple),
and mail to MAA. No postage is necessary**

DSHS Provider Number: _____ (7-digits)

DEA Number: _____ (9-digits)

Name: _____

Street Address: _____

FAX Number: _____

Telephone Number: _____

Thank you for taking the time to complete and return this information sheet!

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